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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/659,011		Filing Date 09/10/2003		To be Mailed
APPLICATION AS FILED — PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
	FOR	NI	UMBER FIL	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b), 6	or (c))	N/A		N/A		N/A			N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), o		N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		*		x \$ =		OR	x \$ =	
IND	DEPENDENT CLAIM CFR 1.16(h))	S	minus 3 =		*		x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	sheet is \$25 additi	If the specification and dr sheets of paper, the appl is \$250 (\$125 for small er additional 50 sheets or fr 35 U.S.C. 41(a)(1)(G) an		on size fee due ) for each on thereof. See						
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))		]			] '		
* If t	* If the difference in column 1 is less than zero, enter "0" in column 2.								]	TOTAL	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMAL	L ENTITY	OR	OTHER THAN OR SMALL ENTITY	
AMENDMENT	04/28/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Ň	Total (37 CFR 1.16(i))	* 49	Minus	** 56	= 0	]	x \$ =		OR	X \$52=	0
뷞	Independent (37 CFR 1.16(h))	* 9	Minus	***12	= 0	]	x \$ =		OR	X \$220=	0
AM	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
L	04/29/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ÆNT	Total (37 CFR 1.16(i))	* 63	Minus	** 56	= 7	]	x \$ =		OR	X \$52 =	364
	Independent (37 CFR 1.16(h))	* 12	Minus	*** 12	= 0	]	x \$ =		OR	X \$220 =	0
AMENDI	Application Size Fee (37 CFR 1.16(s))					]			]		
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						•	TOTAL ADD' <b>L</b> FEE		OR	TOTAL ADD'L FEE	364
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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